Mr. Kechikal P. Balakrishnan Tampi: Then is it not admittedly an advance?

Rao Sahib Dr. N. Kunjan Pillai: Yes. Yarn is supplied to the Central Prison. The Cental prison sells articles made out of it and credits the sale proceeds to the account of the Industries Department which advances money for the purchase of yarn. In this transaction the Sales Depot makes 2 per cent commission by purchasing and supplying yarn to the Central Prison.

Mr. S. Piraviperumal Pillai: May I know whether there is any objection for the Central Prison Department selling the articles and sending the accounts?

Rao Sahib Dr. N. Kunjan Pillai: That is not proper accounting.

Mr. M. N. Paramesvaran Pillai: May I know whether the Jail Department has protested against the Industries Department getting this 2 per cent commission?

Rao Sahib Dr. N. Kunjan Pillai: No. The commission is allowed to the Industries Department only and not to any other department. If it swells the credit sides of the Sales Depot I do not understand why the honourable members should object to it. It is only reasonable that the House passes this demand.

Mr. C. Kumara Das: I have nothing more to say by way of reply. There is no money available with the Industries Department for meeting the bills pending payment. Unless this demand is sanctioned by the House no amount could be paid for the bills sanctioned already.

Chairman: The question before the House is whether it is agreeable for the sanction of Rs. 12,000/— now asked for by the Industries Director.

The motion was put to the vote of the House and carried. The grant was made.

MEDICAL DEPARTMENT.

Mr. James Simpson: Sir, I move for a grant not exceeding Rs. 19,500 for meeting the following expenditure:—

(i) Travelling allowance of officers—Rs, 2,000.

(ii) Grant to the Salvation Army's Leper Colony; Chemmanad—Rs. 2,500.

(iii) Dieting charges for inpatients—Rs. 15,000.

The allotment sanctioned was Rs. 2,500 out of which Rs. 300 was for the Travelling Allowance of the establishment. Traveling Allowance Bills for 1110 to the extent of Rs. 1,245 were not cashed till 1111. This amount was paid from the budget allotment of 1111. During Chingom and Kanni 1111 the Darbar Physician had not time to attend to his usual work of inspection. He had to go

LIBRARY ARCHIVES Kerala Legislative Assembly

about for the supervision of malarial work. The bills for these two months come to Rs. 470. The money actually available for his touring work comes to Rs. 480, which is quite inadequate. Hence this demand.

Coming to the second demand, we could not foresee this item and provide for it in the budget for 1111. Government had promised to the Salvation Army by G. O. dated the 26th January 1933 that if they established a Leper Colony in North Travancore, Government would allow them a consolidated grant of Rs. 4 As. 8 per adult and Rs. 2 and As. 8 for every child per mensem. Now, Sir, this colony was opened only in Vrischigam of this year. Hence we could not make provision for it in the budget for 1111. They started the colony with 4 adults and in Kumbham they had 69 adults.

Mr. M. N. Paramesvaran Pillai: May I know whether this expenditure is to be a recurring one or not?

Mr. James Simpson: This grant will come under "grant to allopathic institutions" in succeeding years.

Mr. M. N. Paramesvaran Pillai: May I know on what date this promise was given to the Salvation Army?

Mr. James Simpson: On 26th January 1933.

Mr. M. N. Paramesvaran Pillai: May I know who is the Inspecting Medical Officer there?

Mr. James Simpson: I think it is one who was once the acting Darbar Physician.

Mr. M. N. Paramesvaran Pillai: May I know whether Dr. Noble has to do anything with this Hospital?

Mr. James Simpson: Dr. Noble is the Chief Medical Officer in the Service of the Salvation Army.

Mr. M. N. Paramesvaran Pillai: May I know whether he is in a position to inform us the number of leper asylums in the Madras Presidency?

Mr. James Simpson: I cannot give that information now.

Mr. M. N. Paramesvaran Pillai: May I know whether any grant is proposed to be given to South Travancore?

Mr. James Simpson: Yes, a grant is given to South Travancore.

Mr. M. N. Paramesvaran Pillai: May I know whether we have got sufficient number of patients in that colony?

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr: James Simpson: Yes, it is full.

Mr. Komilezhathu Sankaran: May I know whether he has any idea of the number of patients?

Mr. James Simpson: I am coming to that. In Meenam there were 69 adults and 8 children.

Medam	...	83 adults.		
Idavam	...	90	...	(expected)
Mithunam	...	100	...	Do.

Therefore taking all into consideration the total expenditure we are expected to incur this year is Rs. 2,695. I asked the House to grant Rs. 2,500 as an arbitrary figure.

Coming to the third part of the demand the request is for Rs. 15,000 for dieting charges to in-patients. As will be seen from the last year's Administration Report, there has been a steady increase in the number of patients treated in the hospitals of the State during the last few years.

	1107	1108	1109	1110
General Hospital	5456	6109	7514	11888
Women and Children's Hospital	6184	6947	7549	9393
Victoria Hospital, Quilon	3284	3644	3607	4791
District Hospital, Quilon	2279	2575	3280	3779
District Hospital, Kottayam	1327	1600	1697	1668
District Hospital, Alleppey	2136	2064	1806	1949

Mr. M. N. Paramesvaran Pillai: What is the total number of patients treated this year?

Mr. James Simpson: I am unable to give that information now. But I can assure that the number for 1111 would not be less than that for 1110. Knowing this position it was requested that Government should grant one lakh of rupees instead of Rs. 85,000 as was granted in the previous year.

Mr. M. N. Paramesvaran Pillai: May I point out that the budget allotment for this year is higher than that of the previous year?

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr. James Simpson: When we asked for Rs. 1,00,000 Government sanctioned Rs. 85,000. We have already exceeded that amount. Therefore the sum of Rs. 15,000 is anticipated to carry us on till the end of Mithunam. I trust the House will grant the demand.

Mr. S. Piraviperumal Pillai: With reference to part (i) of the demand, may I know whether Rs. 2,000 is intended for T. A. to the Darbar Physician or for other officers?

Mr. James Simpson: The Darbar Physician and the staff.

Mr. S. Piraviperumal Pillai: But it is stated "T. A. of officers."

Mr. James Simpson: I do not think so.

Mr. M. Govindan: I believe the Darbar Physician is also an officer.

Mr. S. Piraviperumal Pillai: May I know what the supplementary demand is for, whether it is for the officers or the Darbar Physician?

Mr. James Simpson: It is under T. A. under the head 23 (*a*).

Mr. S. Piraviperumal Pillai: And not for T. A. of officers as has been asked?

Mr. James Simpson: This definitely comes under superintendence.

Mr. S. Piraviperumal Pillai: So this is for the Darbar Physician?

Mr. James Simpson: It is for the Darbar Physician and the staff.

Mr. M. N. Paramesvaran Pillai: Sir, one or two words I wish to say in connection with the third part of this demand. Dieting charge is one of the most important items of expenditure incurred by Government in the Medical Department. During the past few years we have been regularly providing every year Rs. 75,000 in the budget under the item "dieting charges." For the current year we have provided, however, Rs. 85,000, which is in excess of last year's allotment by Rs. 10,000. From the Administration Report we find that in 1110 the number of inpatients treated in the Government hospitals was 66,957. The Darbar Physician is not in a position to enlighten this House as to the number of cases treated in the various Government institutions during the current year and how much of the budgeted allotment has been already spent for the purpose of dieting. Even granting that there has been an increase in the number of in-patients treated this year, is not this House, I ask, entitled to know whether there is so much difference in the number of cases as to necessitate the raising of expenditure from Rs. 85,000 to one lakh of rupees? Besides the

LIBRARY ARCHIVES Kerala Legislative Assembly

[Mr. M. N. Parameswaran Pillai.]

number of in-patients several other aspects have also to be taken into consideration in connection with this demand. Every one knows that the prices of food materials have been steadily falling down since 1105 owing to economic depression. Added to this, the contractors' rates for the supply of articles, I understand, are in very many cases very low. In view of these favourable circumstances there must be stronger and unassailable grounds for supplementing the allotment by a further sum of Rs. 15,000. A mere increase in the number of patients will not, therefore, by itself, be a sufficient justification for the Durbar Physician to approach this House with a supplementary demand.

Sir, let me not be understood as opposing the grant on the ground that the diet now given is sufficient and satisfactory. Every one of us will only be glad if the Darbar Physician proposes to improve the quality of diet. I hope the Darbar Physician will not be surprised to hear that the diet now supplied to the patients in the General Hospital, Trivandrum, is indeed poor and if that be the case in the General Hospital, which is under his direct supervision, one can very well imagine the state of affairs in the mofussil institutions. It is seen from the Administration Report for 1110 that the cost of dieting an in-patient, excluding the in-patients of the hospital for lepers and for mental diseases, was Re. 1 chs. 2 cash 8 per year. This figure given in that official document is evidently a mistake, the result of a fallacy in the calculation. The percentage seems to have been arrived at by dividing the amount of allotment for dieting by the number of in-patients treated in the various hospitals during that year. This calculation is erroneous as it assumes that all the 56,957 patients were treated in the hospitals all the year round. As it is, the percentage works only to something above 1 cash per day per patient. We shall be really thankful to the Darbar Physician if he will only enlighten us how this miracle is performed every day in his department. With one cash per day how is it humanly possible to feed a patient. There does not seem to be proper supervision exercised in the matter of dieting. The Doctor prescribes the diet and leaves the rest to be settled between the avaricious steward and the cook on the one hand and the hungry and suffering patients on the other. The matter requires a sympathetic outlook, a thorough enquiry and an efficient and effective control by the Darbar Physician. I think it would also be better if a non-official body is constituted at every centre with power to inspect the hospitals and record its views from time to time in regard to the management, particularly the dieting. I trust these matters will receive the prompt attention of our young, energetic and enthusiastic Darbar Physician.

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr. J. John Kattakayam : ഞാൻ ഈ ഡിമാൻഡിനെ എതിർക്കുന്നു. സർക്കീട്ട് വകയ്ക്കാണ് രണ്ടായിരം രൂപ അനുവദിക്കണമെന്ന ആവശ്യപ്പെട്ടിരുന്നത്. സർക്കീട്ടിനെ സംബന്ധിച്ചു എനിക്കു രണ്ടു വാക്കുപറയാനുണ്ട്. ഡർബാർഫിസിഷ്യൻ ശരിയായിട്ടു സർക്കീട്ടു ചെയ്തിരുന്നെങ്കിൽ ഓരോ ആസ്പത്രിയിലും നടക്കുന്ന അക്രമങ്ങളെ കണ്ടറിഞ്ഞു വേണ്ടവിധത്തിലുള്ള പ്രതിവിധികൾ ചെയ്യാമായിരുന്നു. ഞാൻ പ്രതിനിധീകരിക്കുന്ന താലൂക്കുകളിൽ ഒന്നായ തൊടുപുഴ താലൂക്കിലുള്ള മെഡിക്കൽ സ്ഥാപനത്തിൽ അഴിമതികൾ നടക്കുന്നു എന്നു് അനേകം പരാതികൾ ഉണ്ടായിട്ടുണ്ടു്. അവിടെ വന്ന ജനപ്രതിനിധികളുടെയും മറുപുറത്തുള്ളവരുടെയും മൊഴിവാങ്ങി നടപടി നടത്തണമെന്നപേക്ഷിച്ചതിൽ ഇതുവരെ അതിനെപ്പറ്റി അന്വേഷിച്ചിട്ടില്ല. ഇതുപോലെയുള്ള അഴിമതികൾ പലസ്ഥലത്തും നടക്കുന്നുണ്ടു്. അതുപോലെ കുഷ്ഠരോഗആശുപത്രിക്കു രണ്ടായിരത്തിയഞ്ഞൂറു രൂപാ അനുവദിക്കണമെന്നാവശ്യപ്പെട്ടിരുന്നുണ്ടു്. ചിലസ്ഥലങ്ങളിൽ സ്കൂളുകൾ ഉണ്ടായിരിക്കയും ചിലസ്ഥലങ്ങളിൽ ഇല്ലാതിരിക്കയും ചെയ്യുന്നതുപോലെ ചിലസ്ഥലങ്ങളിൽ ആസ്പത്രികൾ ധാരാളവും, മറുചിലസ്ഥലങ്ങളിൽ തീരെ ഇല്ലാതിരിക്കയും ചെയ്യുന്നുണ്ടു്. തെക്കിണതിരുവിതാംകൂറിൽ ഗവണ്മെൻറിൽനിന്നും ഗ്രാൻറു കൊടുക്കുന്നതും അല്ലാത്തതുമായി ധാരാളം ആസ്പത്രികൾ ഉണ്ടു് ഡാക്ടർ കുഞ്ഞൻപിള്ള തന്റെ സെൻസസിൽ പറയുന്നതുപോലെയുള്ള സ്ഥലവിഭാഗമനുസരിച്ചു മൈലാൻഡിൽനോക്കിയാൽ ഒരു ആസ്പത്രിയും കാണുകയില്ല. ലോലാൻഡിലും മിഡിൽ ലാൻഡിലും ധാരാളമുണ്ടു്. ഇതിനെ ഒന്നു ശരിയായി വീതിച്ചുകൊടുത്താൽ ഉത്തരതിരുവിതാംകൂറിലും ആസ്പത്രികൾ ഉണ്ടാകുന്നതിനു സംഗതിയാകുന്നതാണു്.

Mr. K. Madhavan Pillai : കുഷ്ഠരോഗആശുപത്രികളേയും വീതിക്കണമൊ?

Mr. J. John Kattakayam : എന്നല്ലാ ഞാൻ പറഞ്ഞതു്. അടുത്തടുത്തുള്ള ആതുരാലയങ്ങളെ നിറുത്തി ഇല്ലാത്ത സ്ഥലങ്ങളിൽ ആതുരാലയങ്ങൾ സ്ഥാപിക്കണമെന്നാണു്.

രോഗികൾക്കു ആഹാരംകൊടുക്കുന്ന വിഷയത്തിൽ ചെലവുണ്ടു്. എന്നാൽ ഡിസ്പെൻസറികളിലെ ആഹാരച്ചെലവു കുറച്ചിരിക്കുന്നു. വേണ്ടതരത്തിൽ വിനിയോഗിച്ചു ബില്ലയക്കണമെന്നു പറയുന്നുണ്ടു്. അങ്ങിനെ ആരും ശരിയായി പ്രവർത്തിക്കുമെന്നു തോന്നുന്നില്ല. ആസ്പത്രികളിൽ രോഗികളുടെ ആവശ്യത്തിനു വച്ചിട്ടുള്ള തുക ഡാക്ടർമാരിൽഭൂരിഭാഗവും കണ്ടമാനം ചെലവെഴുതിയെടുത്തു അവരുടെ പള്ളവീർപ്പിക്കുന്നു

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr. K. Madhavan Pillai: അങ്ങിനെ ചെയ്യുന്നുണ്ടെന്നു തെളിവു കൊടുക്കാമോ?

Mr. J. John Kattakayam: വേണ്ടതരത്തിൽ അന്വേഷിച്ചാൽ അതിന്റെ പരമാർത്ഥം മനസ്സിലാകും. അതിനു തെളിവു കൊടുക്കാൻ തയ്യാറുള്ളവർ കുണ്ടേക്കും. ഞാൻ ഒരാളെപ്പറ്റി മാത്രമല്ലാ പറയുന്നതു്. സ്റ്റോറു ഒട്ടുക്കുള്ള സംഗതിയെപ്പറ്റിയാണ് പറയുന്നതു്. ഡിസ്പൻസറികളിലേക്കുള്ള ആഹാരച്ചെലവുപടി എന്തിനു നിറുത്തി എന്നു ഞാൻ ചോദിക്കുന്നു. അതു നിറുത്തിക്കളയുവാൻ ഡർബാർ ഫിസിഷ്യനെ പ്രേരിപ്പിച്ച സംഗതി എന്താണെന്നു അജ്ഞാതമായിത്തന്നെയിരിക്കുന്നു. ഡിസ്പൻസറികൾക്കു മുൻപു് അനുവദിച്ചിട്ടുള്ള പടി അനുവദിച്ചുകൊടുക്കണമെന്നു ഞാൻ അഭിപ്രായപ്പെടുന്നു. ഈ സംഗതികൾ ഡിപ്പാർട്ടുമെന്റു മേധാവി ശ്രദ്ധിച്ചു പ്രവർത്തിക്കണമെന്നു ഉൽബോധിപ്പിച്ചുകൊള്ളുന്നു.

Mr. Kochikal P. Balakrishnan Tampi: Sir, I support the demand. I am only sorry that the demand has not been for a bigger sum especially under the head 'Dieting Charges'. I know the grant under this head is not sufficient; for instance, I know in the Mavelikara District Hospital, which is a very popular institution, the diet given is really scandalous. I had occasion also to go to the Peermede Hospital where also something like nominal charges are incurred for the diet of patients. It is nothing miraculous that the doctors find it very difficult to manage with this small sum.

Mr. M. Govindan: May I know what is the rate per head?

Mr. Kochikal P. Balakrishnan Tampi: I have no idea. It will not be an exaggeration to say that the cause of mortality in most of our hospitals is deficiency of food after the patients get into treatment. Therefore, I whole-heartedly support the demand under this head.

I do not think there is any great scope for non-official committees or anything of the sort to look into these matters. I know doctors are put to very great difficulty to find dieting. So I request the honourable members would ask the Government to come with a bigger demand for dieting throughout the State in all the hospitals As there is no difference in the standard of comfort between the people of Trivandrum and mofussil and as I find in the General Hospital, the patients are much better fed than in the mofussil hospitals, at least in future Government should try to see that adequate dieting charges are set apart for mofussil hospitals also.

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr. M. Govindan : I am in perfect agreement with Mr. Tampi this time in the matter of the quality of diet and I should be very sorry indeed if the patients in the hospital should come out of it with diseases due to mal-nutrition. I understand that the rate here allowed is only about one-half of what obtains in Madras. Our people here are quite competent to eat as much as the Madrasis and so I should recommend doubling the rate for dieting. With these words I support the demand.

Mr. James Simpson : Sir, the one point on which I should just like to say a few words is the question regarding diet. After one year of touring in the State and going through the dispensaries, I found that large sums of money were being used in illicit ways in these dispensaries but this was not being done so in District Hospitals. Therefore a change in the rules was made according to which only a nominal sum was allotted for the dispensaries, which would be washed off soon. And if a medical officer considered that a case necessitated diet at Government expense, the medical officer sent that diet sheet to the head office where it was scrutinised in the office and examined by the Darbar Physician and if he found it necessary, it was allowed. This is being done even now. The dispensaries, as a matter of fact, are treatment centres for out-patients and not for in-patients. This supplementary grant under this heading is quite urgent and I request the House to pass it.

Since the opportunity is given, I will say that frequent and repeated communications have been received from the member representing Todupuzha supported by various other people. An interpellation was also asked this morning and questions put by several members regarding the complaint against the Medical officer at Todupuzha. The charge against him is that he builds a house and gets money from the people. If he receives money for building his house what can I do? I cannot take any objection to that. They are not giving money for his action as Medical Officer.

Mr. M. N. Paramesvaran Pillai : Does not his position as Medical Officer have any influence in the matter?

Mr. James Simpson : It has no influence. As a Medical Officer he is doing his duties properly. If the complaint is that people are going to give money for building a house, neither I nor Government can take any objection.

Mr. M. N. Paramesvaran Pillai : May I know whether the system of dieting obtaining in the Military Hospital at Trivandrum is the same as the one obtaining in the Medical Department?

Mr. James Simpson : A more scientific system of dieting is obtained in the Military. There, they deal with sepoys.

LIBRARY ARCHIVES Kerala Legislative Assembly

Mr. M. N. Parameśvaran Pillai: I am not speaking about the dieting of sepoys but of the inpatients in the Hospital attached to the Military.

Mr. James Simpson: The same dieting is given there.

Chairman: The motion before the house is that a sum of Rs. 19,500 be granted for the Medical Department.

The motion was put to vote and carried.

The grant was made.

PUBLIC HEALTH.

Dr. M. K. Gopala Pillai: Sir, I beg to move for a grant not exceeding Rs. 15,230 for the purchase of chemicals, etc., for the Public Health Laboratory. The Public Health Laboratory was organised in 1109. This required also the equipment of the Laboratory on modern lines. Approximately an amount of Rs. 20,000 was estimated and this was distributed in the Budget of 1109 and 1110. For the amount of Rs. 10,000 as per 1109 Budget, orders were placed by the Government with Messrs. Baird & Tatlock in London and for the remaining amount of Rs 10,000 orders were placed with some other firms through the Durbar Physician. The stipulation was that the articles should be supplied before the end of 1109 but the company failed to do so. Though the articles were supplied in 1110, it took some time to reconcile the discrepancies and by the time arrangements were made with the Account Office for the payment of the bills, the year 1110 came to a close and the amount lapsed. From this it will be seen that the amounts provided in the Budgets of 1109 and 1110 lapsed as the company failed to supply the articles in time. This year they were able to supply all the articles and the bills which are now pending have to be paid without delay.

Mr. M. N. Parameśvaran Pillai: May I know why the amount was not included in this year's budget?

Dr. M. K. Gopala Pillai: An amount of only Rs. 8,000 was provided in this year's budget. At the time of preparing the budget it was thought that the company would send in their bills for Rs. 10,000 which was provided in 1110 budget but it was only during the last week of Karkadakam that the bills were received and before arrangements were made with the Account Office to pay the amount the year closed and the sum lapsed.

Mr. M. N. Parameśvaran Pillai: May I know whether the articles have been purchased by the Department?

Dr. M. K. Gopala Pillai: These articles were indented for by the Government.

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